SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 51 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Property Casualty Insurers Associa	nd Statements may not be sold or used by any persor the name and address of any political committee to sation of America Political Action Committee	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Douglas E. Allen Mailing Address 145 N High St. #1101 City Columbus	State Zip Code OH 43215-3006	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer State Auto Insurance Companies Receipt For: Primary General Other (specify)	Occupation Vice President & IT Director Aggregate Year-to-Date 600.00	600.00
Full Name (Last, First, Middle Initial) Robert L Jones Mailing Address 412 Stephen Hill Ro City Franklin FEC ID number of contributing federal political committee. Name of Employer	State Zip Code KY 42134-5027 C	Date of Receipt M M M D D D Z D Z D D Z D D D D D D D D
Auto Club Group Receipt For: Primary General Other (specify) ▼	Reg. Sales Director - ACG Aggregate Year-to-Date 250.00	_
Full Name (Last, First, Middle Initial) Mr. Mark E. Grieb Mailing Address 5618 S 169th St City Omaha FEC ID number of contributing federal political committee.	State Zip Code NE 68135-2250	Date of Receipt M M M / D D / Y Y Y Y Y O 6 21 2011 Transaction ID: 33486350 Amount of Each Receipt this Period 250.00
Name of Employer Auto Club Group Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Operating Officer Aggregate Year-to-Date 250.00	- -
SUBTOTAL of Receipts This Page (optional	J	1100.00